Effective October 1, 2003									10	60	11/2	2	
(Column 1) (Column 2) TYP									LLENTITY OTHER THAN OR SMALL ENTITY				
T	OTAL CLAIM:	S	5	86		-		RATE	FEE	٦ آ	RATE	FEE	
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FI			BASIC FE		
To	OTAL CHARGE	ABLE CLAIMS	860	. 86 minus 20=		66		X\$ 9=	594	٠٠٠ الت	 	-	
INDEPENDENT CLAIMS				グ minus 3 =		2.				OR	 	 	
М	JLTIPLE DEPE	NDENT CLAIM'S						X43≐	86	OR	X86=	—	
+ If the difference in column 4 is 1 and								+145=	1 .	OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1061	OR	TOTAL		
(Calumin 4)										OTHER	THAN		
4	L .	(Column 1)	T	(Colun		(Column 3)	l pr	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT	10/25/04	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	. 55	Minus	- 80	0	e e		X\$ 9=		OR	X\$18=		
	Independent	1.8	Minus	1 - 5		-3		X43=	129	OR	X86=	 	
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		ŀ	.446	1-1	1	000		
							L	+145=	<u> </u>	OR	+290=	 	
		(Column 1)		(Colum	- av	(Column 0)	A	ODIT. FEE		JOR ,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING	<u> </u>	(Colum	ST	(Column 3)	r		ADDI-	1 1		4001	
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	***				X\$ 9=		OR	X\$18=		
	Independent	•	Minus				r	X43=		OR	X86=		
	ring i Phese	NTATION OF MU	JETIPLE DE	PENDENT (CLAIM			+145=		OR	+290=		
							AC	TOTAL DIT. FEE		OR .	TOTAL ODIT. FEE		
		(Column 1)		(Columi		(Column 3)							
CIENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus.			= .		X\$ 9=			X\$18=		
5 ⊦	independent	•	Minus	***		a.	\vdash			OR			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F	X43=		OR	X86=		
• 15	If the patry in column 1 is loca than the color is a second and the co									OR	+290=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE													
T	he "Highest Num	ber Previously Paid	For (Total or	o SPACE IS II	ess than) is the i	3. enter "3." lighest number f		_	ropriate box				

Application or Docket Number